Approved for use filrough 7/8//2008. OMB 0651-0622

U.S. Pelent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Pepetwork Reduction Act of 1995, no persons ste required to respond to a collection of Imomation unless it displays a velid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD **Substitute for Form PTO-876** APPLICATION AS FILED - PART I OTHER THAN (Octumn 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED ... NUMBER EXTRA BASIO FEE (87 OFR 1,18(a), (b), or (d)) RATE (4) FEE (\$) RATE (\$) FEE (\$ SEARCH FEE (87 OFR 1.16(A), (1), or (m)) EXAMINATION FEE (97 OFR 1.16(a), (p), or (q)) TOTAL OLAIMS 87 CFR 1.16(1)) eranus 20 🛎 25. x 57 INDEPENDENT CLAIMS (87 CFR 1.16(to) 108 ⇔ 8 aunkm x 200 If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due FEE (37 CFR 1.16(s)) is \$250 (\$126 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (87 CFR 1.160) 180 (EO If the difference in column 1 is less than zero, enter ${\bf 0}$ in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Côlumn 1) (Column 2) (Column 3) OTHER THAN OŘ SMALL ENTITY CLAIMS SMALL ENTITY REMAINING PRESENT NUMBER RATE (\$) AFTER ADDI-RATE (\$) PREVIOUSLY E **EXTRA** ADDI-MENDMENT TIONAL PAID FOR Total (OT CFR 1.460) FEE (\$) Minus FEE (\$) ·OR Independent (27 OFR 1.16(V)) Minus 200 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (87 CFK 1.160) UО TOTAL

| 1 | | | | | | | ADD'L FEE | <u></u> | OR | ADD'L FEE | L |
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| | (1) | (Column 1) . | , | (Oolumn 2) HIGHEST | (Columns) | , , | ٠. | • | | | • |
| MENDMENT | 41277 | REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDI- TIONAL FEE (\$) | | RATE (\$) | ADDI- TIONAL |
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| | THE PRESENTATION OF MULTIPLE DEPENDENT OLAIM (37 CFR 1.16(1)) | | | | | | | | OR | | \sim \sim |
| ; | If the entry in co | olumn 1 is less than | In the ento | La columa a surte | • • • • • • • • • • • • • • • • • • • | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

* If the Highest Number Previously Paid For" IN THIS SPACE is less than 20; enter "2".

* If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "9".

This collection of Information is required by 37 CFR 1.10. The Information is required to obtain or retain a benefit by the public which is to file (and by the finducing gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Paient ADDRESS. SEND TO: Commissioner for Patents; P.O. Box 1450, Alexandria, VA 22313-1450.